DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN

Bureau of Quality Assurance
P.O. Box 2969

Madison WI 53701-2969

Facility Information

Facility Name: ALTERRA STERLING HSE OF SUN PRAIRIE (110491)

Address: 650 BROADWAY DR, SUN PRAIRIE, WI 53590

License Status: REGULAR

Licensed/Certified/Registered 04/30/1998

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0095226 End Date: 07/14/2005 Type: STANDARD Purpose: SURVEY

Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0090915 End Date: 09/05/2003 Type: OTHER Purpose: COMPLAINT

Results: NO STATEMENT OF DEFICIENCY ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Enforcement History

Date: 06/16/2003 SOD #10007786 Appealed: Yes Decision: WITHDRAWN APPEAL (NO STIPULATIO

Sanctions

COMPLY WITH FACILITY PLAN OF CORRECTION

OTHER SANCTION

FORFEITURE---83.14(1)(c)

FORFEITURE---83.14(1)(d)

FORFEITURE---83.41(10)(b)

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Complaint History

Date Complaint Received: 07/18/2003 Date Investigation Completed: 09/05/2003

Subject Area(s) Result SOD #

RESIDENT BEHAVIOR/FACILITY PRACTICE NOT SUBSTANTIATED